# Financial and Operational Dashboard Medical Center

	1.46%	HIN APP		2317		The stant	Mod	dy's Met	rics
	Actual FY 09	Actual FY 10	Actual FY 11	Actual FY 12	YTD Actual FY 13 <sup>(3)</sup>	YTD Plan FY 13	Baa²	Baa <sup>1</sup>	$A^3$
Profitability	1,8	41,000	is the	1776	100	dinida.	1200		
EBIDA Margin %									
Operating Margin %									
Total Margin %									
Return on Assets %									
Liquidity	1 W L	W # 575	A) YELL	511101		REPORT OF	100		
Cash/Investments (000s)									
Days Cash on Hand									
Days in Accounts Receivable									
Capital Structure	EW.	ŞILLE,		Jane 1		TANK	A THE		
Debt Service Coverage Ratio									
Cash to Debt %									
Average Age of Plant (yrs.)									
Capital Spending %									
Revenue			CONTRACTOR OF						
Bad Debt as a % of GPSR									
Uncompensated Care as a % of GPSR					1				
Net Pt Rev. per Adj. Discharge (CMI Adjusted	)								
Discharges excluding Newborns									
Observation Cases									
IP Surgical Procedures									
OP Surgical Procedures									
Outpatient Visits									
Case Mix All Patients									
Case Mix Medicare Patients									
Expense		476		1111	CHARLE SAN				
Full Time Equivalents (FTEs)							1		
FTEs per Adjusted Occupied Bed									
FTE's per 1,000 Patient Days + Observation [	Days								
Employed Salary Cost per FTE									
Employed Benefits \$ per FTE							ı		
Employee Benefit %							l l		
Compensation Ratio %							1		
Total Cost/Case Mix Adj Discharge									
ALOS									
CMI Adj ALOS							N .		

#### **PRICING**

There are several types of people requesting prices:

#### **PRICE COMPARISIONS**

Patients who are looking for prices from different hospitals in the area to see which facility has the lowest prices.

#### PATIENTS WITH SCHEDULED VISITS REQUESTING PRICES:

Patients who are questioning prices to see what their balances will be, such as co-pays, deductibles, or co-insurance.

#### **SELF PAY PATIENTS:**

Patients who are "true self pays" or the service are a non covered service by their insurance company. Pre payment is required for this group.

#### **TYPE OF CONTACT:**

The request may originate from:

- Patients
- Clinics
- Doctor's office

The requests come to Financial Counselor by:

- Phone calls
- Emails

The requestor is required to have 1 of the following

- CPT CODES
- Proper name for test, lab or procedure

#### TO OBTAIN PRICES FOR HOSPITAL CHARGES:

#### **SOARIAN**

- The price list for Soarian will be provided in your Z-Drive
- Double click on My Computer on your desktop
- Double click on your <u>Z drive</u> (\\UMMHCNASO1\Fincoun\$(Z:))
- Double click on folder named <u>PRICING</u>
- Double click on <u>Pricing Service Catalog.xlsx</u>
- Click on Find & Select (binocular icon on top right hand side)
- Click on Find...
- Enter CPT code in box and hit enter. This will bring you to that CPT code. Follow the cell
  to find the price in the price column. ( make sure that the description is correct for the
  cpt code)
- If when you enter the CPT code and hit enter brings you to another column other than the CPT code column, hit find next to find the CPT code.

<sup>\*\*</sup>all can be obtained by the requestor through the ordering physician\*\*

• If you don't find it in sheet 1, look in sheet 2 (bottom left corner of screen)

#### TO OBTAIN PRICES FOR GROUP CHARGES:

IDX:

#### Example:

- 1. BAR
- Select function (shift ?) #24 PRICING INQUIRY AND REPORTS
- Select activity (shift ?) #3 MASTER FEE INQUIRY
- AT PROCEDURE CODE THERE ARE 2 WAYS TO LOOK UP A PRICE

Example 1: use 0 in front of the CPT CODE for all PROFFESSIONAL FEE

Example 2: use 1 in front of the CPT CODE for all OFFICE PROCEDURE – GLOBAL FEE

Price is at the top with current year

#### PROCEDURE TO FOLLOW IF PRICES CAN NOT BE FOUND IN THE DICTIONARY:

If the Financial Counselor is unable to obtain the price with the method describe above an email is sent to a contact for both the Hospital and Physicians.

• The Financial Counselor will send the request via email to:

HOSPITAL: Senior Financial Analyst, under Financial Decision Support (Kristen V)

GROUP: Physician Billing (Jay H)

- The Hospital and Group have a 24 to 48 hour "turn around" to email prices back to Financial Counselor
- If the Financial Counselor doesn't get a response within 24 to 48 hours, he/she will email the group and/or hospital contact one more time. If the counselor still doesn't get a response within the same day that the request was sent for the second time, financial counselor will escalate to a supervisor.
- Once price is received, the Financial Counselor will then call or email the requestor back with prices.
- Financial counselor will document all actions taken in Soarian guarantor field and IDX if the patient has a medical record number
- The Financial Counselor will keep all price sheets with screen prints or emails as "backup" in a log book

 The Financial Counselor will keep a separate spread sheet for common requests, in a shared drive for Financial Counseling in Z-Drive

#### SELF PAY PATIENTS AND SELF PAY SURGICAL PROCEDURES:

These patients are self pay patients who are coming for elective services:

- True self pays (out of state or country)
- · Not covered by insurance
- Not eligible for any assistance from State programs
- Patients with large deductible on their insurance plans

\*For these patients, we can offer a 20% "prompt pay" discount.

(If a larger discount is requested, Financial Counselor will send request to:

1. Supervisors of Financial Counseling, Karina R/ Elena O

Supervisors may then escalate requests to:

Manager of Financial Counseling, Denise C Director of Patient Accounts, Jim G Senior Director of Payment Systems, Lester F

- Requestor will provide: CPT CODES
- Financial Counselor can also email Michelle W for assistance in getting CPT codes
- Financial Counselor will look up prices for both HOSPITAL AND GROUP to get the "ESTIMATED PRICES"
- Financial Counselor will call the patients back with the "ESTIMATED PRICES"
- Financial counselor will document all actions taken in Soarian guarantor field and IDX if the patient has a medical record number

#### **COLLECT PAYMENT FOR SELF PAY / NON COVERED PROCEDURE:**

- Procedure is identified as self pay / or non covered service
- The patient will be instructed by the clinic / department that a PRE-PAYMENT is required prior to the procedure (14 days)
- The patient will be asked to sign a self pay "PRE-PAYMENT" waiver which will indicate the estimated charges for both HOSPITAL and GROUP.
- \*\*this waiver states that the patient will pay the estimated cost of the procedure. If the charges are higher, the patient will be responsible for the balance, and if the charges are lower, the patient will be refunded.

- FULL PAYMENT for both HOSPITAL and GROUP charges must be paid at the hospital cashier 14 days prior to the procedure by:
  - 1. cash
  - 2. credit card (visa, master card, discover)
  - 3. money order
- 20% discount will be applied for all self pay balances
- At the time payment is received, the patient will be provided with a receipt and copy of the pre-payment letter
- Financial Counselor will also keep a copy of this letter with receipts of payment
- Financial Counselor will call the clinic / department when payment is received.
- Financial counselor will document all actions taken in Soarian guarantor field and IDX if the patient has a medical record number

Workflow Tools: Registry Clinic Worksheet

Registry (from O	Registry Clinic Session Worksheet (from Office of Clinical Integration)	tion Works	sheet tion)	3												ĺ					
					Process Measures	Measu	se					_0	Outcome Measures	Measu	sə						
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#### Center for the Advancement of Primary Care



May 2013

### HIGH BLOOD PRESSURE NEWS YOU CAN USE

#### Live Healthier - Eat Less Salt

#### Sodium Guidelines

The 2010 Dietary Guidelines recommend that healthy people limit their sodium intake to no more than 2,300 milligrams a day – that is equal to about one teaspoon of salt. For certain populations, the recommendation is even less. If you're 51 years or older, African American, or have high blood pressure, diabetes or kidney disease, experts recommend consuming no more than 1,500 milligrams a day or a little over half a teaspoon of salt! Most Americans consume on average 3,400 milligrams a day – well over the recommended amounts.

#### Link between Sodium and High Blood Pressure

Interestingly, the body can subsist on very small amounts of sodium to maintain fluid balance, blood pressure, and muscle and nerve tissue. However, eating too much salt attracts water into the blood vessels, which increases the volume of blood and over time can increase your blood pressure. High blood pressure (also known as hypertension) is a major risk factor for heart disease, kidney disease and stroke. As we age, limiting sodium intake becomes even more important since blood pressure normally rises with age.

#### Top Sodium Contributors

Surprisingly, it's not the salt shaker that's the main sodium culprit in our diet. While sodium is found naturally in some foods (like fruits and vegetables), the majority of American's sodium intake comes from salt that has been added to processed food. Below are the top 10 contributors of sodium to our diet:

- Bread and rolls
- Cold cuts/cured meats
- Pizza
- Poultry (such as breaded chicken)
- Soups (such as canned or restaurant soups)
- Sandwiches with condiments (such as hot dogs, hamburgers and submarine sandwiches)

#### Tips to Reduce Sodium in the Diet

The good news is there are some simple steps you can take to lower the amount of sodium in your diet to achieve your sodium goal and keep your blood pressure in check. Over time, your taste buds will adapt to less salt and you may not even miss it!

• Fill up on fruits and vegetables. Fruits and vegetables are high in potassium. Potassium has been shown to reduce high blood pressure in combination with a low sodium diet.

- Cheese
- Pasta mixed dishes (such as lasagna and spaghetti with meat sauce)
- Meat mixed dishes (such as meatloaf, beef stew or chili)
- Snacks (such as popcorn, pretzels, chips and crackers)

### Questions for Your Health Care Team

- Does my age affect how much salt I should eat?
- Are salt-free seasonings ok to use?
- Compare product labels. Read the nutrition facts label to compare products for the least amount of sodium. Choose products that say "No Salt Added" or "Reduced Sodium."

- Limit eating out to no more than once a week. Restaurant meals have a lot of salt! For example, a McDonald's Big Mac, fries and shake contain more than 1500 mg of sodium and that's just for one meal!
- Prepare more meals at home. If you make your meal at home you'll be able to better control the amount of sodium in it. Use herbs and spices to add flavor instead of salt, and don't forget to include a helping or two of potassium-rich vegetables!
- Reduce your intake of bread products and salty snacks. Choose salads for lunch instead of sandwiches or plain oatmeal for breakfast (which has no salt) instead of toast, waffles or pancakes. Look for unsalted versions of normally salty snacks like nuts and popcorn. Try a piece of fruit and plain yogurt or raw vegetables and hummus if you're looking for something to hold you over between meals.
- Skip the salt shaker. Use herbs and spices to enhance the flavor of your meal. Try salt-free seasoning mixes like Mrs. Dash®.

Resources: American Heart Association - www.heart.org; FDA - www.fda.gov

### Take a Walk this Spring!



Now that spring is here, it's a great time to get some fresh air and start walking again. Here are just a few ideas to add a little fun to your step:

- Pack a pair of binoculars to bird watch.
- Jazz up your walk with an iPod.
- Ask a friend to help you stay motivated by walking together.
- Add light weights once you have established walking as a routine and you need that extra challenge.
- Reward yourself at the end of your walk with a nutritious lunch or snack!

# 1 DECISION TO TAKE HEART HEALTH SERIOUSLY

Join experts from the UMass Memorial Health Care Heart and Vascular Center of Excellence for two free community education programs focused on keeping your heart healthy! For program topics and information, visit <a href="www.umassmemorial.org/heart">www.umassmemorial.org/heart</a> or call 888-358-6277.

# Recipe for Heart Health: Zucchini Casserole

Courtesy of mrsdash.com

Serves 2; Preparation Time: 10 min; Cooking Time: 15 min

1 teaspoon canola oil 2 medium zucchini, chopped

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1 tablespoon dry bread crumbs 1 tablespoon Mrs. Dash® Lemon Pepper Seasoning Blend

2 egg whites 2 tablespoon Parmesan cheese, grated

1/3 cup light sour cream

Preheat oven to 350°F. Heat oil in large skillet, add zucchini and sauté lightly, approximately three to four minutes, and set aside. Lightly beat egg whites. Mix sour cream, Parmesan cheese, Mrs. Dash® Lemon Pepper and egg whites. Add cooked zucchini to egg mixture. Mix well. Pour into a one quart greased, shallow baking dish. Sprinkle with breadcrumbs and bake in preheated oven for 15 to 20 minutes or until heated through.

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Health Care



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#### Center for the Advancement of Primary Care



#### DIABETES NEWS YOU CAN USE

August 2013

I feel fantastic and thank

od every day for the help

support I received from ta. I take one day at a

#### In Our Patients' Words

Patients with diabetes often feel like their life and health is out of their hands. UMass Memorial Medical Center patient Kathy Baird shows in the following story that you, the patient, can play an important role in managing your life and good health. Thank you for sharing your story!

I was diagnosed with diabetes at age 43 in April 1997. I had no previous symptoms but lab work indicated the results. My glucose was 170, my A1C was 8.1, my triglycerides were 308 and my cholesterol was 282.

At the beginning, I was in total denial about being diabetic, even though I knew that it ran in the family. My grandfather had a leg amputated because of diabetes, but still, I thought the results had to be wrong.

I made an appointment with my primary care physician (PCP) to discuss the results. He told me to watch my diet and to keep my glucose under 200. After a few visits, I thought I was doing well and eventually went back to my old habits. My PCP then put me on medication (pill) but I was getting very sick from it. The next step for me was insulin. I still wasn't seeing much of an improvement, so my next visit was to an endocrinologist. There were more changes to my insulin, and I continued to diet and exercise. For some reason, in my mind, I always felt that there was more to this than me having to take a bunch of different medications.

I wasn't getting the help I needed so I made an appointment with another endocrinologist, who I have been seeing for seven years now. It always seemed we were tweaking my insulin or trying something else. During my last visit in January, I met with Roberta Powell, clinical coordinator of diabetes education at the Medical Center, with an A1C of 10.3 and glucose of 243. Her first recommendation was to try V-Go, a new portable daily pump. We started out with the lowest dose, eventually increasing it to the highest dose, but with no change in the numbers!

Roberta suggested that I try a carb-free diet for three days to see if there were any changes in my numbers. I was horrified to think, "how I could function without carbs," but promised her I would try. After just one day on this diet, my glucose reading was 136, much better than those high 200s and 300s. My first reaction was surprise (and shock and joy). I continued to take the V-Go and pill (glipizide) for one month. My numbers were going low but I was nervous that they were going to go too low. I talked it over with Roberta and made the decision to stop all meds and just continue with the no-carb diet.

Three months later, my A1C is down to 7.0, my glucose is at 123 and I lost 25 pounds! I feel fantastic and thank God every day for the help and support I received from Roberta. I take one day at a time, medication free! If you ever get a gut feeling that something isn't right, don't be afraid to speak up and make those feelings known.



#### Diabetes and Exercise: Turn Off the TV and Head Outside

Try these games at your next cookout; they're enjoyed by all ages and provide hours of fun in your own backyard or a local park:

Frisbee

- Volleyball
- Bocce ball

- Badminton
- Horseshoes

To see how many calories you can burn during a particular activity, from badminton to household chores, check out this website: www.nutristrategy.com/caloriesburned.htm.

### Our Recipe of the Month: Summer Vegetable Frittata

Courtesy of the American Diabetes Association – www.diabetes.org

Serves: 4. Prep Time: 20 minutes.

This frittata is a great way to get more veggies into your day. Have it for brunch or dinner! Side suggestion: Serve this frittata with a green salad with light balsamic vinaigrette.



8 ounces mushrooms, diced

1 medium red bell pepper, seeded and diced

1 small onion, diced

3 cups fresh spinach

2 eggs

5 egg whites

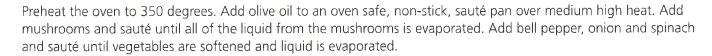
1/4 cup skim milk

½ teaspoon salt (optional)

½ teaspoon ground black pepper

¼ teaspoon cayenne pepper

1 tablespoon chopped fresh basil



Whisk eggs, egg whites, milk, salt (optional), pepper, cayenne pepper and basil in a medium bowl. Pour over vegetables and stir until eggs start to set. Smooth the top of the frittata with a spatula, and put in oven to bake for 20 minutes or until eggs are set. Slide the frittata out of the pan onto a plate and slice into eight pie slices.

**Nutritional information (serving size: 2 slices):** Calories 130, **carbohydrates 9 g**, protein 11 g, fat 6.0 g, saturated fat 1.3 g, sugar 2 g, dietary fiber 2, cholesterol 95mg, sodium 135 mg, potassium 550 mg.

#### **Attend Local Diabetes Events**

Join UMass Memorial Health Care at Worcester area events in September.

#### Diabetes Conference and Health Fair

Saturday, September 21, 2013
Registration: 7:30 am
Conference and Health Fair: 9 am
DCU Center
50 Foster Street, Worcester, MA

Visit: tcoyd.org/national-conferences/worcester-ma-2013.html

#### Step Out: Walk to Stop Diabetes

Saturday, September 28, 2013
Registration: 9 am, Walk: 10 am
UMass Memorial Medical Center - University Campus
55 Lake Avenue North, Worcester, MA
Visit: stepout.diabetes.org

#### Web Sources for Diabetes Education

- American Diabetes Association www.diabetes.org or call 1-800-DIABETES (1-800-342-2383)
- Learning About Diabetes, Inc. www.learningaboutdiabetes.org

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